

This Thesis is ascertained to be a copy of that
presented by Mr. Theodore Physik M.D. 1824
AN

ESSAY

ON

DYSENTERY

BY

WILLIAM JOHNSON

OF

DELAWARE

Printed March 10th 1826

1825



This is a statement to be kept of the
property of the Delaware State

1822

of

DELAWARE

by

WILLIAM JOHNSON

of

DELAWARE

of the State of Delaware

1822

Dysentery, the subject of the present essay, is defined by Cullen to be a contagious pyrexia with frequent mucous or bloody evacuations, accompanied with griping or tenesmus, the alvine feces being for the most part retained. In giving to this disease a contagious character, Dr. Cullen has been followed by most of the British and Continental writers. This opinion however, has been combatted by Professor Chapman and other American physicians, who assert, that ordinarily it is not capable of being propagated from one individual to another, and that this circumstance never takes place unless the disease assumes a Typhoid type. Independently of all authority, personal observation would induce us to question the accuracy of Cullen's definition in this respect. But with this exception his definition could not perhaps be amended.

the subject of the present
may be found in the
and many other sources of
information, management and
control. The subject is
extensive. It is not
possible to do more than
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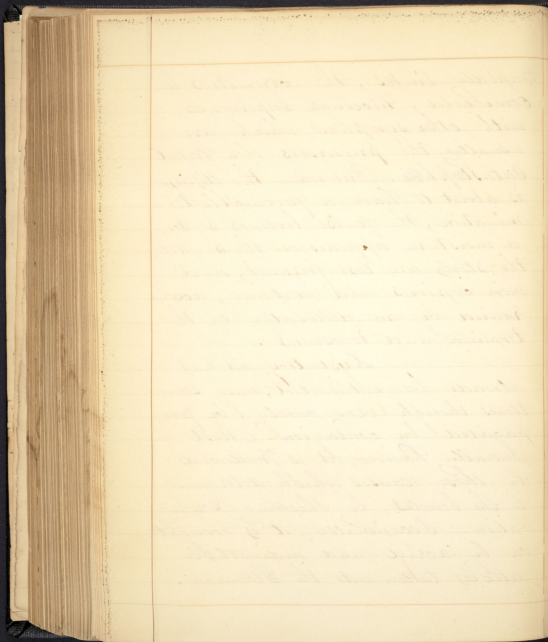
Dysentery appears to be of ancient origin, having been known so far back as the days of Hippocrates. Although peculiar to no country, it is much more prevalent in some than in others. In certain districts of our own country it prevails to an alarming extent, and often with great fatality. In Hospitals, Ships, Camps, and other crowded receptacles, it frequently assumes a most malignant aspect. This disease may occur at any season of the year, but generally it makes its appearance about the end of Summer or beginning of Autumn. In some seasons Sporadic cases of the disease are met with; in others it prevails epidemically. Dysentery sometimes commences with chillings which is soon succeeded by fever, accompanied with griping, and an ineffectual desire to go to stool.

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But perhaps more frequently the topical affection appears without being preceded by rigour or chilliness; and in very many instances there is little or no febrile action. Sometimes the disease is attended by flatulence, nausea and vomiting. The discharges though frequent, are in small quantities and of an unnatural appearance, consisting for the most part of slime or mucus mixed with blood, though not infrequently they are purely sanguineous and unaccompanied by a faecal smell. Those small indurated masses, so commonly noticed by authors under the term *Scybala*, are of very unusual occurrence. If the disease be not arrested, all of the symptoms become aggravated. The countenance assumes a peculiarly distressed appearance, the strength

Rapidly sinks, the extremities become cold, Hiccough supervenes, with other symptoms which are usually the precursors of a fatal Catastrophe. But when the disease is about to have a favourable termination, the pulse becomes softer, a moisture appears on the surface, the stools are less frequent, and more copious and natural, accompanied by an alleviation of the tormina and tenesmus.

Dysentery, as has already been intimated, may sometimes though very rarely, be propagated by contagion. Most generally however, it is produced by those causes which determine to the bowels, by checking perspiration. Occasionally, it is brought on by acrid and indigestible articles taken into the Stomach.



When the disease prevails epidemically, it then, like all other epidemics, has an ærio-terrestrial origin.

With regard to the Pathology of dysentery, it is pretty well ascertained that there is always more or less inflammation of the mucous membrane of the large intestines, now and then extending to the small, and even to the stomach. This inflammation, when mild, produces that increased mucous discharge, so common to the inflammation of all mucous membranes; but when excessive, it has a strong tendency to terminate in gangrene.

In the treatment of dysentery, much has been said about the propriety of venesection. Taught by dissection

the nature of the disease, we should not hesitate about using the lancet, where there is a hard full pulse, and other symptoms indicative of an inflammatory diathesis. And, even under these circumstances, little or no benefit will usually be derived, unless the quantity of blood abstracted be very considerable. Nor will a single bleeding, however copious, always suffice; so long as the symptoms demanding it continue, it may be repeated without any apprehension of injurious consequences. When directed by a sound and discriminating judgment, bloodletting relieves the spasmodic action of the bowels, abates inflammation, exchanges a hot dry surface for a moist one, and awakens the susceptibility of the system to the impression

The history of the United States
is a story of struggle and progress.
The first step was to establish a
government and a system of laws.
The next step was to expand the
territory and to develop the
resources of the land.
The third step was to build a
strong and united nation.
The fourth step was to
improve the lives of the people.
The fifth step was to
spread the principles of
freedom and justice to
all men.

of other remedies. Yet it must be confessed that there are many cases in which the lancet may be dispensed with, and others in which it cannot be used without manifest injury; this is particularly observable in some seasons, and in certain districts of country, where the disease from the commencement assumes a typhoid character.

Having premised Venesection, or if that operation be contraindicated by the state of the System, we must in the next place proceed to cleanse the alimentary Canal. For this purpose, where there is much gastric derangement, evinced by nausea, and vomiting of bilious, and other fecal matters as is often the case in miasmatic situations, it will be advisable to direct an emetic. And in this

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instance speccanawha is perhaps
preferable to the antimonial pre-
parations. Though we are aware
that the emetic tartar, James's powder,
and the nitrum antimonii cratum,
are recommended by practitioners
of no little eminence. With re-
spect to the latter article, which
was introduced into regular prac-
tice by the classic Dr. Sympson
and afterwards so highly eulo-
gised by Sir John Pringle, we
have never seen ^{it} given with a view
to its emetic operation. But when
exhibited in small doses, and
in the early stage of the disease,
we have repeatedly witnessed the
most striking benefit from it,
especially in that form of the
disease, accompanied by
considerable sanguineous dis-
charges. In these cases, it is

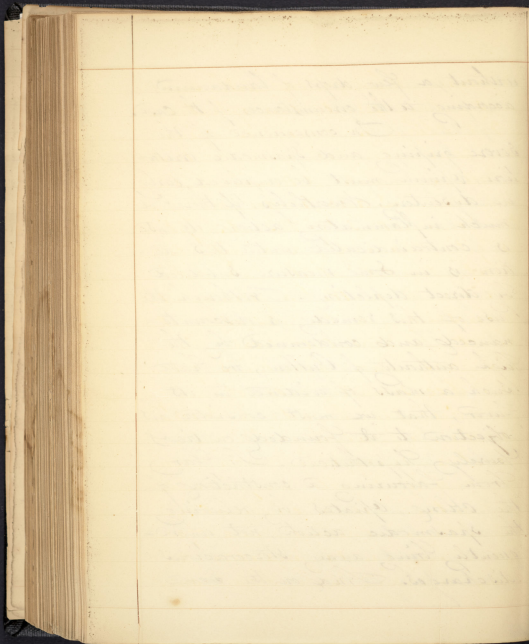
Sometimes acts as a cathartic,
bringing away from the lovely
natural discharges; at other
times it arrests the disease with-
out any sensible operation.

Cathartics
have been consecrated to the
treatment of dysentery, by the
unanimous consent of practi-
tioners in every section of the
world. Still, however, some dif-
ference of opinion prevails as
to the relative efficacy of the
articles composing this class.
Calomel is perhaps the most
suitable purgative to commence
with. But in order to obtain
its full effect, judging from
personal observation I should
say, it must be given in
large doses; and it is one
of those medicines whose cathar-

tic operation is not in a ratio
proportionate to an increase
of the ordinary dose we need
not be apprehensive of its pro-
ducing hypercathartis. More
than once have I been surprised
at the salutary impression
which twenty grains of Calomel
made on the disease, when
comparatively little benefit was
produced by half that quanti-
ty. The bowels being operated
on by means of the Mercurial
preparation just mentioned, we
may have recourse to some of
the other Medicines of the
~~other Medicines~~ of the same
class, especially Castor Oil and
Epsom Salts, or what perhaps
answers better, the latter article
in combination with small portions
of tartarized antimony with ^{or}

without a few drops of laudanum,
according to the circumstances of the case.

In consequence of the
severe griping and spasmodic irrita-
tion, which must be employed early
in dysentery. Nevertheless, if there be
much inflammatory action, its use
is contraindicated, until this ac-
tion is in some measure subdued
by direct depletion. Although the
use of this remedy is discounte-
nanced, and condemned by the
high authority of Cullen, we have
such a mass of evidence in its
favor, that we must consider his
objection to it founded on views
purely hypothetical. So far
from procuring a constriction of
the colon, opiates by relieving
the spasmodic action, not unfre-
quently bring away stercoraceous
discharges. And on the same



principle, when joined with purgatives, they promote their operation. But Opium is commonly given in combination with some of these articles which determine to the surface. Dover's powder, one of the preparations of this description is often employed, and with the most decided utility. In order however to make a permanent impression on the disease, it must be repeated every five or six hours, and sometimes oftener. Occasionally also, it may be advisable to add to Dover's powder a portion of Calomel. Another prescription which may be employed with unequivocal advantage, is a combination of Opium, Calomel, and Ipecacuanha, in the proportion of half a grain of the former, and

of the latter, and two of Calomel
to be repeated every three or
four hours. Besides those reme-
dies which have already been
enumerated, various others have
at different times been recom-
mended in the treatment of dys-
entery. But into the considera-
tion of these I cannot, at this time
enter, without encroaching too
much on your time and patience.
Suffice it to say that among
these are *Spicacuanka*, *China*
which no article has been more
highly extolled, *Saccharum Sa-
turni*, *Prussiat of Iron*, *Charcoal*,
the mineral acids, *opium*, *Suppo-
sitories*, *Butter*, *Flaxseed tea*,
with *laudanum*, *Starch* and the
cucumata; *Epispastics*, the warm
bath, hot fomentations, the *Flannel*
roller &c. most of which may, at

The weather was so fine
that I went out for a walk
in the park. I saw many
beautiful flowers and
trees. The children were
playing happily. I saw
a small stream with
fish in it. The birds
were singing. I saw
a cat and a dog. I
saw a man and a woman.
I saw a boy and a girl.
I saw a horse and a cow.
I saw a sheep and a pig.
I saw a chicken and a duck.
I saw a rabbit and a squirrel.
I saw a mole and a fox.
I saw a badger and a weasel.
I saw a hedgehog and a snake.
I saw a lizard and a frog.
I saw a toad and a turtle.
I saw a snail and a slug.
I saw a spider and a fly.
I saw a bee and a wasp.
I saw a ant and a termite.
I saw a mole and a fox.
I saw a badger and a weasel.
I saw a hedgehog and a snake.
I saw a lizard and a frog.
I saw a toad and a turtle.
I saw a snail and a slug.
I saw a spider and a fly.
I saw a bee and a wasp.
I saw a ant and a termite.

times be resorted to, with unequivocal
advantage.

As yet we have said nothing
respecting the diet in Dysentery.
There being much irritation and inflam-
mation, the patient must evidently
be restricted to the most bland
articles, and even they should be
given in a fluid form. Rice Water,
Barley water, Rhenish whey, The
Mucilages of Tragacanth & Arabic,
Saffron, Gum, Sage, Anniseed, Tapioca
&c, are of this nature and will be
found to afford sufficient nourish-
ment.

